ISSN: 3107-3883
(Online)

GLOBAL E- JOURNAL OF SOCIAL SCIENTIFIC RESEARCH

VOL1. ISSUE 9
SEPTEMBER 2025

International, Open Access, Peer Reviewed, Cross Ref.,
Multidisciplinary, Bi-Lingual (English and Hindi), Monthly E-Journal
Global Center for Social Dynamic Research

2025

ISSN: 3107-3883(Online)

GLOBAL E-JOURNAL OF SOCIAL SCIENTIFIC RESEARCH

Seventh Edition
Vol. I, Issue 9
September 2025

International, Open Access, Peer Reviewed, Cross Ref.,
Multidisciplinary, Bi-Lingual (English and Hindi), Monthly E-Journal of
Global Center for Social Dynamic Research

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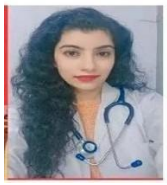

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2025

Global E-Journal of Social Scientific Research ©
Vol.1 Issue 9 (September 2025)
International, Open Access, Peer Reviewed, Cross Ref., Multidisciplinary,
Bi-Lingual (English and Hindi), Monthly E-Journal

GLOBAL CENTER FOR SOCIAL DYNAMIC RESEARCH
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Published by GCSDR Publications
GLOBAL CENTER FOR SOCIAL DYNAMIC RESEARCH
9711186810, 9540098853
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ISSN: 3107-3883 (Online)

Global E-Journal of Social Scientific Research
Vol. 1| Issue 9| September 2025 | Pg 1-10

3rd INTERNATIONAL CONFERENCE ON "INNOVATIONS IN PSYCHOLOGY AND WELLBEING OF NEW GENERATION"

GCSDR 2025

CONFERENCE PROCEEDINGS

Global Center for Social Dynamic Research

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Source: Global E-Journal of Social Scientific Research
Vol. 1. Issue 9, September 2025, Page Nos. 1-10
Published by: Global Center for Social Dynamic Research

3rd International Conference by
Global Center for Social Dynamic Research (GCSDR)
www.globalcsdr.com/www.globaljssr.com
GCSDR
"Innovations in Psychology and Wellbeing of New Generation"
Hon'ble PM Sh. Narendra Modi Ji
VISION VIKSIT BHARAT @2047
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Supreme Court of India
Rev. (Dr.) Osuji. Peter
Director, Destitute Places Center for out of School Youth/Spiritan Center, Philippines
Advocate Abhishek Carls
Director, Law and legal Affairs, GCSDR
Dr. Simrat kaur
Guest Faculty(Psychology), Dr. Bhim Rao Ambedkar College, DU & Amity University, Noida, UP
Saturday, 20th September 2025
3:00 p.m.(IST) Onwards
CONVENOR
Mr. Samir C Minz
Director(H), GCSDR/Former SDM/ Collector of Stamps/
Registrar ICMA, Delhi
Ms. Nelisa Carls
Director, Program & Publications,GCSDR
Dr. Neelam C Dey,
Social Scientist/National Awardee
Executive Director, GCSDR
Chief Editor, Global E-Journal of Social Scientific Research
Livestream @ FACEBOOK/YOUTUBE
Global Center for Social Dynamic Research/Global E-Journal of Social Scientific Research (ISSN:3107-3883)

Conference Date : *20th September 2025*

Venue : Global Center for Social Dynamic Research- Zoom (Online)

Source : Global E-Journal of Social Scientific Research, Volume 1 | Issue 9 | September 2025

Indexed and listed in: OJS, Google Scholar, Cross Ref, Springer Nature, Open AIRE, Academia, Zenodo, Internet Archive, Fig Share, Index Copernicus, World CAT

Papers Submission: Submission of Research Articles and Papers by the key Note Speakers of the Conference for publication in GJSSR

Published By: Global Center for Social Dynamic Research

Preface / Editorial Note

We are delighted to present the Conference Proceedings of the Conference held on the topic **"Innovation in Psychology and Wellbeing of New Generation"**, that was organised by the Global Center for Social Dynamic Research.

The Conference has brought together distinguished psychologists, mental health practitioners, researchers, and academicians from world over to share new insights, innovative approaches, and practical solutions addressing the challenges of the modern generation.

We express our sincere gratitude to the advisory board, reviewers, and organizing committee for their tireless contributions.

Dr. Neelam C Dey

Chief Editor

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- Dr. Neelam C Dey

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- Mr. Samir C Minz, Director (Honorary)- Policy, Administration and Operations, GCSDR/ Former, State Civil Service Officer, Delhi **(Convenor of the Conference)**
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- Ms. Nelisa Carls, Director, Programme and Publications, GCSDR/Member, Indian Council for Social Science Research (ICSSR)

Conference Schedule (Highlights)

S. No.	Name	Time Slot (p.m.)	Topic
1	Dr. Neelam C Dey	3:00-3:05	Welcome Address
2	Major General (Dr.) G. S. Lamba	3:07-3:15	Opening Address

3	Dr. Neelam C Dey	3:17-3:27	Introduction & Beginning of the Conference
4	Major General (Dr.) G. S. Lamba	3:30-3:40	From Stigma to Strength : A Soldier's Perspective on Mental Health Challenges
5	Prof. Devender Tayal	3:43-3:53	Role of AI in Psychology
6	Prof. Vibha Sharma	3:55-4:05	Suicide Prevention among Youth- Risk & Protective Factors/ Promoting Good Mental Health Practices among Youth
7	Mr. Pramod Kumar	4:08-4:18	Juvenile Justice System and Mental Health Reforms
8	Rev.(Dr.) Osuji Peter International Member, GCSDR	4:21-4:31	Combatting Mental health challenges of adolescents and youth
9	Mr. Mohit Kumar Prasad	4:34-4:44	Mental health & Law
10	Dr. Smriti Mehra International Member, GCSDR	4:47-4:57	Growing up with TB: Economic and Social impact on Youth
11	Prof. Shailesh Iyer	5:00-5:10	Technology Innovation in Psychological Well-being
12	Dr. Babu Joseph	5:12-5:22	Role of Religion, Spirituality and Cultural belief System
13	Advocate Prashant Kumar	5:25-5:35	Legal Rights Of Adolescents Under The Mental Healthcare Act, 2017
14	Advocate Abhishek Carls	5:38-5:48	National And International Policy Frameworks for Youth Mental Health
15	Ms. Nelisa Carls	6:00-6:10	Youth and Adolescents
16	Dr. Simrat Kaur	6:12-6:22	Emotional intelligence and Resilience training for adolescents
17	Question-Answer/Discussion Session (On Floor)		Dr Neelam C Dey
18	Announcements		Dr Neelam C Dey
19	Vote of Thanks		Mr. Samir C Minz

Keynote & Topics of Talk (Extended Summaries)

Keynote Address

Innovation in Psychology for the Next Generation

Major General (Dr.) G. S. Lamba, **VSM (Veteran)Dean Academic Affairs, Akal University, Raman Road, Talwandi Sabo, Bathinda (Punjab)**

The keynote address by **Dr. Major G. S. Lamba** highlighted the evolving landscape of psychology and

its role in promoting the wellbeing of the new generation. Drawing from both clinical practice and research experience, Dr. Lamba emphasized the significance of innovative approaches in addressing mental health challenges, particularly among youth.

Topics of Talk

1. FROM STIGMA TO STRENGTH: A SOLDIER'S PERSPECTIVE ON MENTAL HEALTH CHALLENGES OF ADOLESCENTS AND YOUTH

Major General (Dr.) G. S. Lamba, VSM (Veteran)

Dean Academic Affairs, Akal University, Raman Road, Talwandi Sabo, Bathinda (Punjab)

Dr. Major G. S. Lamba delivered his keynote address on the sub topic : *"From Stigma to Strength: A Soldier's Perspective on Adolescent and Youth Mental Health."* In his talk, he explored the complex challenges faced by adolescents and young people of today, presenting them through the unique lens of a soldier's experience. He emphasized the values of resilience, camaraderie, and collective action drawn from military service, duly suggesting that these principles can be effectively applied to strengthen youth's mental wellbeing.

Dr. Lamba highlighted the pressing issues of stigma, family disintegration, academic pressure, and digital stress, which continue to affect young people across India and the world. Drawing parallels between the silent battles of soldiers on the frontlines and the internal struggles of youth in modern society, he called for a paradigm shift—from perceiving mental health as weakness to recognizing it as an opportunity for building strength.

He further suggested that resilience-building, purpose-driven engagement, and community support are crucial protective factors. He also stressed the need for institutional reforms, the integration of mental health literacy in curricula, positive use of technology, and stronger community-based support systems.

In conclusion, Dr. Lamba affirmed that true strength lies not in hiding one's vulnerability, but in confronting it with courage, empathy, and collective responsibility. His keynote provided a multi-level roadmap—spanning individuals, families, institutions, and society—towards addressing one of the defining challenges of our generation.

2. THE ROLE OF RELIGION, SPIRITUALITYAND CULTURAL BELIEF SYSTEMS IN MENTAL HEALTH

Dr Babu Joseph Karakombi, Director, SVD, New Delhi/

Former Spokesperson, Catholic Bishops Conference of India/ Director, Satya Prakashan Sanchar Kendra Central Province Bhopal, MP

Dr. Babu Joseph delivered an insightful invited talk addressing the urgent issue of mental health, particularly among young people in India. He emphasized that mental wellbeing has become a pressing national concern, citing with concern the rising number of young men and women who take their own lives over issues that could often be addressed with timely support. This trend, he noted, is deeply troubling for both society and the nation as a whole.

His presentation focused on the possible nexus and influence of religious beliefs, spiritual experiences, and cultural practices on one's mental health. He observed that a vast majority of people worldwide adhere to some religious tradition, while a small section may not affiliate themselves with any established religious system.

Dr. Joseph stressed that religious beliefs can have both positive and negative effects on mental health. While they can foster hope, resilience, moral grounding, and a sense of purpose, certain dogmas or practices may contribute to stress, guilt, or social exclusion. He underscored the importance of a nuanced understanding of this relationship, particularly in addressing the mental wellbeing of the younger generation.

In conclusion, Dr. Joseph called for integrative approaches that respect cultural and spiritual dimensions while promoting mental health literacy and supportive interventions tailored to the needs of youth.

3. LEGAL RIGHTS OF ADOLESCENTS UNDER THE MENTAL HEALTHCARE ACT, 2017

Mr. Prashant Kumar, Advocate Prashant Kumar, Supreme Court of India

Mr. Prashant Kumar, highlighted the provisions of the Act that safeguard the mental health rights of adolescents, including access to care, consent, and confidentiality. His address discussed the role of legal frameworks in ensuring dignity, protection, and empowerment for young people facing mental health challenges. Mr. Kumar emphasized the importance of awareness, advocacy, and enforcement of these rights. He concluded by calling for greater collaboration between legal professionals, mental health practitioners, and

policymakers to strengthen adolescent mental health protections.

4. JUVENILE JUSTICE SYSTEM AND MENTAL HEALTH REFORMS

Mr. Pramod Kumar, Superintendent, Central Jail, Tihar, Delhi

Mr. Pramod Kumar delivered an insightful talk on *"Juvenile Justice System and Mental Health Reform."* He discussed the critical intersection between juvenile justice and mental health, highlighting how many young offenders face underlying psychological challenges. His address stressed the need for reform that incorporates mental health assessments, counselling, and rehabilitation within the justice system. Mr. Kumar emphasized a restorative approach that prioritizes care, rehabilitation, and reintegration over punishment.

5. NATIONAL AND INTERNATIONAL POLICY FRAMEWORKS FOR YOUTH MENTAL HEALTH

Mr. Abhishek Carls, Advocate, Delhi High Court, Director, Law and legal Affairs, GCSDR

Advocate Abhishek Carls delivered an insightful talk on *"National and International Policy Frameworks for Youth Mental Health."* He highlighted key policy initiatives and frameworks that aims to protect and promote the mental wellbeing of young people both in India and globally. His address examined the effectiveness of existing policies, gaps in implementation, and emerging best practices. Advocate Carls stressed the need for harmonizing national strategies with international standards to ensure comprehensive mental health support. He concluded by urging collaborative action among governments, civil society, and youth organizations to strengthen policy frameworks.

6. YOUTH AND ADOLESCENTs

Ms. Nelisa Carls, Director, Program &, Publications, GCSDR

Ms. Nelisa Carls delivered an engaging talk on *"Youth and Adolescents."* She highlighted the unique psychological, social, and developmental challenges faced by young people in today's fast-changing world. Her address emphasized the importance of fostering resilience, emotional wellbeing, and supportive environments for youth. Ms. Carls discussed strategies for empowering adolescents through education, mentorship, and community engagement. She concluded by calling for a collaborative approach to ensuring the holistic development of young people.

7. ROLE OF AI IN PSYCHOLOGY

Prof. Devender Tayal, Director, IQAC, Professor/ Department of Computer Science Engg., Indira Gandhi Delhi Tech. Univ. for Women(IGDTUW), Govt. of Delhi, Ex-Dean(Academic Affairs)/ Proctor, IGDTUW/ HOD(CSE), GGSIPU

Prof. Devender Tayal delivered an insightful talk on the Role of Artificial Intelligence in Psychology.

8. SUICIDE PREVENTION AMONG YOUTH- RISK & PROTECTIVE FACTORS/ PROMOTING GOOD MENTAL HEALTH PRACTICES AMONG YOUTH

Prof.(Dr.)Vibha Sharma, Deptt. of Clinical Psychology, Institute of Human Behaviour& Allied Sciences, IHBAS Delhi.

Prof. Vibha Sharma delivered a powerful keynote on "Suicide Prevention among Youth – Risk & Protective Factors / Promoting Good Mental Health Practices among Youth."

9. COMBATTING MENTAL HEALTH CHALLENGES OF ADOLESCENTS AND YOUTH

Rev.(Dr.) Osuji Peter, Director, Destitute Places Center, for out of School Youth/Spiritan, Center, Philippines

Rev. (Dr.) Osuji Peter delivered an enlightening talk on *"Combatting Mental Health Challenges of Adolescents and Youth."* .

10. MENTAL HEALTH & LAW

Mr. Mohit Kumar Prasad, Civil Judge (Senior Div.)/, Addl. Chief Judicial Magistrate, Agra High Court of Judicature of Allahabad

Mr. Mohit Kumar Prasad, , delivered an important talk on "Mental Health & Law

11. GROWING UP WITH TB: ECONOMIC AND SOCIAL IMPACT ON YOUTH

Dr. Smriti Mehra, Scientist/Professor, Department of Molecular & Microbiology Diseases Intervention Program, Texas Biomedical Research Institute, USA

Dr. Smriti Mehra, , delivered a compelling talk on "Growing up with TB: Economic and Social Impact

on Youth." **Technology Innovation in Psychological Well-being**

12. PROF. (DR.) SAILESH SURYANARAYAN IYER

Principal, Nar Narayan Shastri Institute of Technology - Institute of Forensic Sciences & Cyber Security, Gujarat

Prof. (Dr.) Sailesh Suryanarayan Iyer, delivered an insightful talk on *"Technology Innovation in Psychological Well-being"*

13. EMOTIONAL INTELLIGENCE AND RESILIENCE TRAINING FOR ADOLESCENTS

Dr. Simrat Kaur, Guest Faculty (Psychology), Dr. Bhim Rao Ambedkar College, DU & Amity University, Noida, UP

Dr. Simrat Kaur delivered an insightful talk on*"* **Emotional Intelligence and Resilience Training for Adolescents".**

14. QUESTION-ANSWER/DISCUSSION SESSION (ON FLOOR)

Dr. Neelam C. Dey facilitated a dynamic Question-Answer session by putting forward a series of thought-provoking questions to the floor. Her questions spanned diverse themes of the conference, including soldiers' mental health, the role of AI, suicide prevention, juvenile justice reform, technology innovation, legal frameworks, and youth wellbeing. She challenged delegates to think critically about how these remedies could move beyond paper and be implemented effectively in real life. Strategies discussed included policy advocacy, collaborative action plans, pilot projects, capacity building, public engagement, and integration into institutional frameworks to ensure lasting impact. This interactive session concluded with a shared commitment to translating knowledge into practice.

ANNOUNCEMENTS

During the above Conference, Dr. Neelam C. Dey, Executive Director and Director of Research, GCSDR proudly announced the launch of a big initiative of the GCSDR named as "**Youth First"**. Prof. Devender Tayal

had the honour to do the formal inauguration. This landmark Campaign is dedicated to enhancing the mental health and wellbeing of adolescents and youth by way of organising Marathon, Workshops, Regular Training of Teaching and Non-Teaching Staff, Administrative Staff, Counselling Programmes, Online and Offline Sensitization Programmes, Stress Management Programmes etc. taking due note of detailed Guidelines laid by the Hon'ble Supreme Court of India as a benchmark to contain the grave situation.

The initiative aims to foster resilience, promote emotional intelligence, and provide accessible mental health resources at community and institutional levels, both. Our focus will include awareness campaigns, capacity-building workshops, policy advocacy, and collaborative projects involving educators, mental health professionals, policymakers, and youth leaders. The "Youth First" initiative represents a shared commitment to transforming research and dialogue into practical actions for the betterment of the new generation.

VOTE OF THANKS

Mr. Samir C. Minz, Convenor of the Conference delivered the Vote of Thanks, expressing heartfelt gratitude to all participants and speakers who made the event a big success. He acknowledged the invaluable contributions of the keynote speakers, invited experts, and delegates whose insights highly enriched the discussions. Mr. Minz who has held significant posts of Sub Divisional Magistrate/Collector of Stamps, Delhi/ Dy Assessor of Collector, EDMC/Registrar, ICMA/Member of Managing Committee of the Government run Model Technical Institute, New Delhi and Government Nominee for the Interview Boards of Directorate of Education, Delhi appreciated and concluded with the message of a continued collaboration, urging all stakeholders to carry forward the spirit of the Conference into concrete actions for the healthy wellbeing of youth of our Country.

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Published on behalf of the Global Center for Social Dynamic Research, India Global E-Journal of Social Scientific Research, ISSN:3107-3883(Online) is indexed and listed **in OJS, Google Scholar, Cross Ref, Springer Nature, Open AIRE, Academia, Zenodo, Internet Archive, Fig Share, Index Copernicus, World CAT.**

It is a principal outlet for the multi-disciplinary scholarly articles which are being published by the Global Center for Social Dynamic Research, India.

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ISSN: 3107-3883 (Online)

Global E-Journal of Social Scientific Research
Vol. 1| Issue 9| September 2025 | Pg 11-17

FROM STIGMA TO STRENGTH: A SOLDIER'S PERSPECTIVE ON MENTAL HEALTH CHALLENGES OF ADOLESCENTS AND YOUTH

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Source: Global E-Journal of Social Scientific Research
Vol. 1. Issue 9, September 2025, Page Nos. 11-17
(Paper Orally presented in the International Conference "Innovation in Psychology and Wellbeing of New Generation")
Published by: Global Center for Social Dynamic Research

ABSTRACT

This research paper explores adolescent and youth mental health challenges through the lens of a soldier's perspective, emphasizing the values of resilience, camaraderie, and collective action derived from military service. The paper argues for a paradigm shift from stigma to strength, drawing parallels between the silent battles fought by soldiers on the frontlines and the internal struggles faced by young people in contemporary society. Reviewing global and Indian literature on adolescent mental health, the study highlights stigma, family disintegration, academic pressures, and digital stress as key challenges. It also draws from military psychology to suggest resilience-building, purpose-driven engagement, and community support as protective factors. Recommendations include institutional reforms, integration of mental health literacy in curricula, leveraging technology positively, and strengthening community support systems. The paper concludes that true strength lies not in suppressing vulnerability but in confronting it with courage, empathy, and collective responsibility. The analysis spans multiple levels–individual, family, institutional, and societal—providing a comprehensive roadmap for addressing one of the defining challenges of our time.

KEYWORDS: adolescent mental health, resilience, stigma, soldier's perspective, India

DOI: https://doi.org/10.64706/g3rgn029

This research paper explores adolescent and youth mental health challenges through the lens of a soldier's perspective, emphasizing the values of resilience, camaraderie, and collective action derived from military service. The paper argues for a paradigm shift from stigma to strength, drawing parallels between the silent battles fought by soldiers on the frontlines and the internal struggles faced by young people in contemporary society. Reviewing global and Indian literature on adolescent mental health, the study highlights stigma, family disintegration, academic pressures, and digital stress as key challenges. It also draws from military psychology to suggest resilience-building, purpose-driven engagement, and community support as protective factors. Recommendations include institutional reforms, integration of mental health literacy in curricula, leveraging technology positively, and strengthening community support systems. The paper concludes that true strength lies not in suppressing vulnerability but in confronting it with courage, empathy, and collective responsibility. The analysis spans multiple levels— individual, family, institutional, and societal—providing a comprehensive roadmap for addressing one of the defining challenges of our time.

INTRODUCTION

Mental health has emerged as one of the most pressing issues of the 21st century, particularly among adolescents and youth. Globally, young people are experiencing unprecedented levels of anxiety, depression, and stress (World Health Organization [WHO], 2022). Rapid technological advancement, academic competition, economic uncertainties, family disintegration, and exposure to social media have compounded the problem. In India, the crisis is acute, with nearly 65% of the population under the age of

35. The strength and productivity of this demographic dividend will define the future of the nation. However, if youth mental health is neglected, this asset may turn into a liability (Patel et al., 2018).

The perspective of a soldier brings unique insights into this discourse. Soldiers are trained to confront adversity, build resilience, and foster camaraderie under extreme conditions. These values, if adapted appropriately, can offer a framework to address youth mental health challenges. Drawing on lived experiences from military service and subsequent academic leadership, this paper reflects on how the soldier's ethos can inform strategies to confront the silent enemy of mental distress in adolescents and youth.

LITERATURE REVIEW

Research on adolescent and youth mental health reveals a concerning global trend. The WHO (2022) estimates that one in seven adolescents experiences a mental health condition, with depression being a leading cause of illness and disability. Suicide is the fourth leading cause of death among individuals aged 15–29. Yet, stigma and lack of awareness remain significant barriers to treatment (Goffman, 1963; Corrigan, 2004).

In the Indian context, the National Mental Health Survey (NIMHANS, 2016) reported that nearly 14% of the population required active mental health interventions. Cultural stigma, shortage of mental health professionals, and inadequate institutional support exacerbate the crisis (Kumar & Singh, 2020). Studies highlight that Indian adolescents face stressors such as parental expectations, academic pressure, and limited outlets for emotional expression (Gupta & Khandelwal, 2021).

Family dynamics play a crucial role. The breakdown of joint family systems has weakened traditional support networks, leaving many young people without the guidance of elders. Additionally, the rise of nuclear families and the 'single-child phenomenon' contribute to traits such as reduced adaptability, egocentrism, and difficulties in group dynamics (Singh, 2019).

Social media and technology have a dual impact. While they provide platforms for connection, they also increase exposure to cyberbullying, comparison, and digital fatigue (Twenge, 2017). Scholars argue for digital resilience—training youth to navigate online spaces critically and responsibly (Livingstone & Helsper, 2007).

Protective factors include resilience-building, social support, and purpose-driven activities. Masten (2001) identifies resilience as an ordinary adaptive process that can be cultivated through education and supportive relationships. Community-based interventions and school-based programs have shown significant potential in improving youth mental health outcomes (Fazel et al., 2014).

CONCEPTUAL FRAMEWORK: A SOLDIER'S PERSPECTIVE

The soldier's perspective on youth mental health can be summarized under three interrelated principles:

1. The Paradigm Shift: From stigma to strength.
2. The Power of Prevention: Building fortified minds.
3. The Call to Collective Action: The platoon as a community.

The Paradigm Shift involves dismantling outdated narratives equating mental distress with weakness. Instead, youth must be encouraged to view help-seeking as a sign of

strength. Military culture, while emphasizing toughness, also underscores the importance of seeking help and supporting comrades in need.

The Power of Prevention reflects the military principle of proactive defense. Just as soldiers train for contingencies, youth must be equipped with skills such as mindfulness, stress management, and adaptive coping strategies before crises arise. Purpose-driven engagement, whether in community projects or academic pursuits, can act as protective buffers.

The Call to Collective Action draws from the military ethos of leaving no one behind. Families, educators, peers, and policymakers must form a unified front to support vulnerable youth. Community resilience mirrors the military platoon, where the strength of the unit depends on the well-being of every member.

ANALYSIS

Applying military resilience models to adolescent contexts offers valuable insights. The military trains individuals to endure adversity, regulate emotions, and rely on teamwork. Similarly, adolescents can benefit from structured interventions that teach coping strategies, encourage purpose-driven engagement, and foster supportive peer networks (Southwick & Charney, 2012).

However, caution is warranted. Military toughness should not be romanticized or imposed on youth. The focus must remain on balancing resilience with emotional openness. True courage lies in acknowledging vulnerability and seeking help when necessary. Programs must, therefore, avoid perpetuating toxic masculinity or unrealistic ideals of stoicism.

Policy implications are significant. Integrating mental health literacy into school curricula, increasing access to counselors, and leveraging technology for telehealth services are essential steps. India's demographic dividend presents both an opportunity and a challenge. Investing in youth mental health is not only a health

priority but also a national security imperative.

RECOMMENDATIONS

Based on the analysis, literature and soldier's perspective, the following recommendations are proposed:

1. **Education**: Integrate mental health literacy into curricula at school and university levels.
2. **Prevention**: Introduce resilience training programs, including mindfulness and stress management.
3. **Technology**: Develop digital platforms for tele-counseling, peer networks, and awareness campaigns.
4. **Institutions**: Train educators and administrators to recognize and respond to mental distress.
5. **Policy:** Advocate for increased government funding and policies prioritizing youth mental health.
6. **Community:** Encourage volunteerism, service learning, and purpose-driven youth engagement.
7. **Research:** Conduct longitudinal studies on the impact of resilience-building interventions in Indian contexts.

CONCLUSION

The soldier's perspective on adolescent and youth mental health underscores that strength is not the absence of vulnerability but the capacity to confront and overcome it with courage and empathy. Military values of resilience, purpose, and collective responsibility provide powerful lessons for society. By embracing a paradigm shift, prioritizing prevention, and fostering collective action, we can empower the next generation to transform stigma into strength. Addressing youth mental health is not merely a medical issue but a moral, social, and national imperative.

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ISSN: 3107-3883 (Online)

Global E-Journal of Social Scientific Research
Vol. 1| Issue 9| September 2025 | Pg 18-20

THE ROLE OF RELIGION, SPIRITUALITY AND CULTURAL BELIEF SYSTEMS IN MENTAL HEALTH

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Source: Global E-Journal of Social Scientific Research
Vol. 1. Issue 9, September 2025, Page Nos. 25-27
(Paper Orally presented in the International Conference "Innovation in Psychology and Wellbeing of New Generation")
Published by: Global Center for Social Dynamic Research

ABSTRACT:

The timely intervention on the issue of mental health of especially of the young people in our country is laudable because it has become a pressing issue in India where young men and women are taking their own life without batting an eye lid for trivial matters. This is worrisome for the society and nation.

This paper is focussed on the possible nexus and influence of religious beliefs, spiritual experiences and cultural practices on one's mental health. It is an undeniable fact that most people in the world subscribe to one religious system or the other; a small section of the population, of course, may not affiliate themselves to any established religious system. And religious beliefs can have both positive and negative influence in maintaining one's mental health.

KEY WORDS: Role of Religion, Spirituality, Cultural Beliefs, Mental Health, Adolescents, Youth, India

Positively, religions provide their adherents a blueprint for life: a value system, a sense of community fellowship, code of conduct, and above all a meaning system to live by. And following a religion can be ennobling for its followers provided they consider and treat religion as one of their – albeit important - aspects of life. A healthy balance is to be maintained among various aspects of one's life and not dragged into exaggeration of any one particular aspect of life.

DOI: https://doi.org/10.64706/ez0a4x55

William James a well-known philosopher and psychologist, in his seminal book, 'Varieties of Religious Experience' has defended the value of religious experiences as something that contributes towards one's personality. He goes on to say that even the 'bizarre' religious experience carries a meaning for the subject, though others may dismiss it as something beyond the range of rationality.

Negatively religion can contribute towards mental disorder if it is used indiscriminately at every turn of one's life. That is to say appealing to religion even for those aspects that do not fall under its purview can lead one to cloud one's vision of life and thereby detail his individual and social connectivity. And it can even lead one to illusionary approach to life. Some critics of religion such as Karl Marx and Sigmund Freud have considered religion as unrealistic and even unnecessary for carrying on with one's life; it can even be considered neurosis.

The fact remains that religion if practiced in right earnest can become a means for maintaining good mental health.

Spirituality, often is intrinsically related to a particular religious tradition; hence we have Christian, Hindu, Muslim, Buddhist spiritualities and so on. And each of these spiritualities has contributed towards human growth and welfare in so many different ways. Each spirituality attempts to raise the level of consciousness of its members in knowing and relating to the divine power described in various forms in their respective religious texts and traditions.

However, there are neo-spiritual movements that do not want to align with any one particular religion or religious tradition; it rather prefers to follow a non-affiliated path that leads people to find inner strength and resources to face life and its demands. To my mind, it is the fall out of the recent trends of advanced societies to go beyond the confines of religion, coupled with the push of the secular ideologies that relegate religion to the margins. These neo-spiritualities do influence the mental health of people. While there are genuine seekers within these neo-spiritual movements who want to delve deeper into the mystery of life though the practice of various means they suggest, there are also others who under the guise of these movements pursue their own selfish agenda. And often less informed and gullible people fall prey to the unscrupulous elements in such spiritual movements, and it will have an adverse effect on their mental health. Unfortunately, there are no safeguards against such misuse of spiritual movements prevalent in the society today, except that the law of the land comes into force when some patently criminal activities are exposed.

Cultural values and practices are often influenced by -though not exclusively – by religions and their

belief systems. And cultural conditioning of individuals and social systems have a bearing on mental health. While some cultural values and practices can be quite liberating for individuals, some others can be intimidating and even stifling one's individuality. This is more applicable for women and other vulnerable sections of the society that often bear the brunt of cultural stereotyping. It is unfortunate that in some areas of our country mental health is culturally viewed not as a discase that can be treated but as something consequential to the influence of 'evil spirits'. This distortion needs to be changed and it can happen only with raising the level of awareness among people regarding the mental health issues as something related to human beings.

CONCLUSION

it would be quite right to say that religion, spirituality and culture are intertwined with mental health issues. They do influence individuals in their vision of life, conduct and relationships. And if these factors are able to positively contribute towards bettering the mental health of people, it is something to be welcomed; but if they turn out to be stumbling block then they have to be reviewed and renewed in the light of modern science and knowledge regarding human beings and their wholistic health.

ISSN: 3107-3883 (Online)

Global E-Journal of Social Scientific Research
Vol. 1| Issue 9| September 2025 | Pg 21-23

LEGAL RIGHTS OF ADOLESCENTS UNDER THE MENTAL HEALTHCARE ACT, 2017

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Source: Global E-Journal of Social Scientific Research
Vol. 1. Issue 9, September 2025, Page Nos. 28-30
(Paper Orally presented in the International Conference "Innovation in Psychology and Wellbeing of New Generation")
Published by: Global Center for Social Dynamic Research

ABSTRACT

The intricate and often challenging nexus of mental health and the law, particularly as it relates to our most vulnerable citizens, our children. As legal practitioners, our role is not merely to interpret statutes but to act as sentinels for justice, ensuring that the law serves its highest purpose—to protect and uplift. The law's engagement with mental health, especially for juveniles, is a litmus test of our society's compassion and commitment to a rights-based framework.

Key Words: Legal Rights, Mental HealthCare Act 2017, Adolescents, Education, Advocate, Supreme Court, Right of Children

LEGAL RIGHTS OF ADOLESCENTS UNDER THE MENTAL HEALTHCARE ACT, 2017

The Mental Healthcare Act of 2017 (MHCA) was a watershed moment, shifting the paradigm from the outdated Lunacy Act of 1912. It fundamentally recognizes that every person, including a minor, has a right to mental healthcare. This is not a charity; it is a fundamental right.

While the MHCA grants a minor's Nominated Representative (NR)—typically a parent or legal guardian—the authority to make decisions regarding inpatient admission and treatment, the Act is not without its safeguards. Section 87 of the MHCA outlines the procedure for admitting a minor, requiring the recommendation of two mental health professionals. Crucially, it mandates that minors be accommodated separately from adults, in a "developmentally appropriate" environment.

DOI: https://doi.org/10.64706/449kf577

This legislative intent is echoed in judicial pronouncements. In the landmark case of Krishnan v. Union of India, the Supreme Court emphasized the need for a rights-based judicial approach to juvenile mental health. The court's ruling served as a clarion call, directing authorities to prioritize the implementation of the MHCA in relation to children and adolescents, and recognizing the right to mental health as an integral component of the Right to Life under Article 21 of the Constitution of India. This judgment highlighted the failure of state institutions to provide adequate mental healthcare and mandated comprehensive rehabilitation and support services.

JUVENILE JUSTICE SYSTEM AND MENTAL HEALTH REFORM

The Juvenile Justice (Care and Protection of Children) Act, 2015 (JJ Act) is premised on the principle of rehabilitation over retribution. However, the ground reality often fails to meet this ideal. A significant number of children in the juvenile justice system suffer from undiagnosed and untreated mental health conditions, often as a result of trauma, abuse, or neglect.

The Supreme Court has consistently intervened to uphold the rights of these children. In Sheela Barse v. Union of India, a landmark case, the court's directions were aimed at ensuring that children are not confined in prisons like adults, as this would have a harmful effect on their growth and development. The court emphasized that children should be kept in separate detention homes and have their matters heard by a special court. While this case predates the MHCA, its principles laid the foundation for a more humane approach to juvenile justice by recognizing the unique vulnerability of children in conflict with the law.

The courts have rightly focused on the need for mandatory mental health screenings and therapeutic interventions within the juvenile justice system to address the root causes of delinquent behavior and foster a path toward recovery and reintegration into society.

SCHOOL DISCIPLINE, CORPORAL PUNISHMENT, AND CHILD PROTECTION LAWS

The battle against corporal punishment is a testament to the evolving understanding of child psychology and rights. For too long, the law has been slow to recognize that the cane and the slap are not tools of discipline but instruments of violence that inflict deep psychological wounds.

The Right of Children to Free and Compulsory Education Act, 2009 (RTE Act) explicitly prohibits "physical punishment and mental harassment." This prohibition is further reinforced by the Juvenile Justice

Act, which considers corporal punishment in a child care institution a punishable offense.

In a pivotal ruling, the Delhi High Court in Parents Forum for Meaningful Education v. Union of India struck down parts of the Delhi School Education Rules, 1973, that permitted corporal punishment, holding them to be violative of Articles 14 and 21 of the Constitution. This judgment affirmed that subjecting a child to physical violence "scars the mind...and robs him of his dignity," thereby violating the fundamental right to life. The Supreme Court has repeatedly affirmed this principle, most recently in the case of Sukdeb Saha v. State of Andhra Pradesh, where it recognized the right to mental health as an integral component of the right to life and laid down binding guidelines for educational institutions to prevent student suicides.

PRIVACY, CONSENT, AND ETHICAL ISSUES IN YOUTH MENTAL HEALTH RECORDS

The digital age introduces a new frontier of legal and ethical challenges, particularly concerning the privacy of youth mental health records. While the Digital Personal Data Protection (DPDP) Act of 2023 provides a foundational legal framework for data protection, it doesn't sufficiently address the unique sensitivities of mental health data.

The principle of confidentiality is paramount in the therapeutic relationship. Without it, a young person will not feel safe to seek help. However, this right is not absolute. In the legal realm, the balance between a minor's right to privacy and the parents' right to know is a delicate one. Case law on this topic is still evolving. In Mrjyoti Jeena vs. Government of NCT of Delhi, the Central Information Commission highlighted the unique nature of psychiatric records, recognizing that their disclosure could potentially harm the patient and breach the confidentiality of other individuals involved in the treatment. This case, while not directly on youth privacy, underscores the general principle that psychiatric records are not akin to ordinary medical records.

The MHCA itself provides some guidance, stating that a minor who is a patient has the right to confidentiality. While parental consent is a requirement for treatment, the spirit of the law, and a sound ethical practice, is to empower the young person as much as possible, respecting their autonomy and only disclosing information to parents when there is a clear and present danger to the minor or others.

IN CONCLUSION, Advocate’s, work is far from over. It continues to push for a more empathetic and holistic legal system that recognize mental health as a core aspect of human rights. The law must evolve from a reactive instrument to a proactive force for social good, ensuring that every child is not just protected from harm, but also nurtured to reach their full potential.

ISSN: 3107-3883 (Online)
Global E-Journal of Social Scientific Research
Vol 1. Issue 10. September 2025 Pg 23-28

भारतीय जेलों में मनोवैज्ञानिक नवाचार

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Vol 1. Issue 10. September 2025 Pg 23-28

स्रोतः ग्लोबल ई–जर्नल ऑफ सोशल साइंटिफिक रिसर्च वर्ष1 अंक 9, सितंबर 2025

(Paper Orally presented in the International Conference "Innovation in Psychology and Wellbeing of New Generation")
प्रकाशकः ग्लोबल सैंटर फॉर सोशल सांइटिफिक रिसर्च

सारांश

भारत की जेलों और किशोर सुधार गृहों में कैदियों के मानसिक स्वास्थ्य और पुनर्वास पर ध्यान देते हुए कई नवाचार अपनाए गए हैं। ध्यान (मेडिटेशन), योग, मनोवैज्ञानिक परामर्श (थेरेपी) तथा डिजिटल उपकरणों का उपयोग, इन सुधारात्मक उपायों के प्रमुख उदाहरण हैं। ये कार्यक्रम न केवल वयस्क बंदियों बल्कि किशोर अपराधियों पर भी केंद्रित हैं, और इनके जरिए कैदियों के मानसिक कल्याण में सुधार तथा पुनर्वास की सफलता की कई कहानियाँ सामने आई हैं।

मुख्य शब्दः भारतीय जेल, सुधार गृह, मनोविज्ञान, मनोवैज्ञानिक परामर्श, स्वास्थ्य, कैदी, तिहाड़ जेल, कारावास, विपश्यना, योग

ध्यान और योग कार्यक्रम

भारतीय कारागारों में ध्यान एवं योग को तनाव कम करने और कैदियों के व्यवहार में सकारात्मक बदलाव लाने के लिए व्यापक रूप से लागू किया जा रहा है। विपश्यना ध्यान इसका एक प्रमुख उदाहरण है, जिसे 1990 के दशक में तिहाड़ जेल (दिल्ली) में शुरू किया गया था। अध्ययनों में पाया गया है कि विपश्यना का अभ्यास करने वाले कैदियों में क्रोध व बदले की भावना कम हुई, कैदियों व जेल स्टॉफ के बीच संबंध अधिक सौहार्दपूर्ण बने और आत्म–अनुशासन में सुधार आया। वर्ष 1993–94 में तिहाड़ जेल में आयोजित विपश्यना पाठ्यक्रमों के बाद कैदियों में चिंता, अवसाद, शत्रुता और निराशा में महत्वपूर्ण कमी दर्ज की गई, साथ ही भविष्य के प्रति आशावाद बढ़ा।

ध्यान एवं योग कार्यक्रम आज कई जेलों में विभिन्न संस्थाओं की मदद से चल रहे हैं। आर्ट ऑफ लिविंग जैसे संगठनों ने 1990 से कैदियों व जेल कर्मियों के लिए योग, प्राणायाम और ध्यान सिखाने के कार्यक्रम शुरू किए, जिनका असर बेहद सकारात्मक रहा है। इस कार्यक्रम के परिणामस्वरूप कैदियों में अवसाद और चिंता में कमी, नींद की गुणवत्ता

DOI: https://doi.org/10.64706/m3hqrt18

में सुधार और आपसी समझ में वृद्धि जैसे बदलाव देखे गए हैं। भारत में 100 से अधिक जेलों के 3.5 लाख से ज्यादा बंदी योग–ध्यान का लाभ उठा चुके हैं। 60,000 से अधिक कैदी और 130 स्टाफ सदस्य इन सत्रों में भाग ले चुके हैं, जिससे उनके मानसिक एवं शारीरिक स्वास्थ्य में उल्लेखनीय सुधार देखा गया। ध्यान के इन अभ्यासों से कैदियों को अपने नकारात्मक भावों पर नियंत्रण पाना और मन की शांति अनुभव करना संभव हुआ है।

परामर्श एवं थेरेपी की पहल

कैदियों के मनोवैज्ञानिक स्वास्थ्य को सुधारने के लिए मनोवैज्ञानिक परामर्श (काउंसलिंग) और थेरेपी संबंधी नवाचार भी अपनाए जा रहे हैं। उदाहरण के लिए, दिल्ली की तिहाड़ समेत सभी जेलों में 2022 में "साइकोलॉजिकल फर्स्ट एड" प्रशिक्षित 33 सलाहकारों (काउंसलर्स) को शामिल किया गया जो कैदियों को तनाव की स्थिति में तुरंत परामर्श सहायता प्रदान करते हैं। कोरोना महामारी के बाद बढ़ती चिंता को देखते हुए इस पहल को तेज किया गया, ताकि नए आने वाले कैदियों को जेल जीवन के अनुकूलन में मदद मिले और अवसाद या घबराहट जैसी समस्याओं से तुरंत निपटा जा सके। विशेषज्ञों का मानना है कि जेल में मनोवैज्ञानिक प्राथमिक उपचार एक वैज्ञानिक हस्तक्षेप है, जो बंदियों एवं स्टाफ को मानसिक स्वास्थ्य संकट को समझने में मददगार साबित होता है।

इसी तरह कुछ राज्यों ने नवाचार करते हुए बंदियों के व्यवहार में बदलाव लाने हेतु थेरेपी प्रोग्राम शुरू किए हैं। गुजरात की सभी केंद्रीय जेलों में "समर्थ" नामक पहल चलाई जा रही है, जो अपराधियों के लिए भारत का प्रथम फोरेंसिक ब्ठज (कॉग्निटिव–बिहेवियरल थेरेपी) आधारित पुनर्वास मॉडल है। समर्थ कार्यक्रम के माध्यम से कैदियों को समस्या–समाधान के कौशल और सकारात्मक सोच विकसित करने में सहायता मिलती है। यह प्रमाण–आधारित कार्यक्रम बंदियों के उपचार हेतु तैयार रहने की क्षमता, मनोवैज्ञानिक लक्षणों में कमी तथा आत्म–सम्मान में वृद्धि जैसे सकारात्मक प्रभाव दिखा रहा है। इसके अतिरिक्त, तेलंगाना में "उन्नति" नामक पहल के अंतर्गत तथा कुछ अन्य जगह पीयर काउंसलिंग (बंदी द्वारा बंदी को परामर्श) की व्यवस्था की गई है। इन पहलों में बंदियों के व्यवहारिक परिवर्तन पर ध्यान केंद्रित किया जाता है, जहां प्रशिक्षित सह–कैदी उनकी भावनात्मक मदद करते हैं। इस तरह के समुच्चय प्रयास कैदियों के भीतर आत्म–विश्वास बढ़ाने और आपसी सहयोग की भावना विकसित करने में सफल रहे हैं।

डिजिटल उपकरणों का उपयोग

प्रौद्योगिकी के उपयोग से भी कैदियों के मानसिक सुख–चौन में सुधार लाने की कोशिशें की जा रही हैं। कई जेलों में ई–प्रिजन परियोजना के तहत वीडियो कॉल सुविधाएं शुरू की गई हैं, ताकि बंदी अपने परिजनों से नियमित संपर्क रख सकें। उदाहरणस्वरूप, महाराष्ट्र की जेलों में कैदियों (विशेषकर विदेशी कैदियों) को प्रत्येक दो सप्ताह में 15 मिनट वीडियो कॉल की अनुमति दी गई है। जेल विभाग के अनुसार, बाहरी दुनिया से कटे विदेशी कैदी निराशा महसूस करते थे, और वीडियो कॉल शुरू करने से उनके मानसिक तनाव में कमी आई है। परिजनों से बात करने की यह सुविधा कैदियों की

मानसिक पीड़ा को कम कर कुछ राहत प्रदान कर रही है। डिजिटल नवाचारों में ऐसे प्रयास शामिल हैं जो कैदियों को परिवार से जोड़ने के साथ–साथ शिक्षा और कौशल विकास के ऑनलाइन साधन भी उपलब्ध कराते हैं। कुछ जेलों में बंदियों के लिए नियंत्रित इंटरनेट एक्सेस या डिजिटल पाठ्यक्रम भी आरंभ किए गए हैं, जिससे वे नई कौशल सीखकर आत्मनिर्भर बनने की दिशा में अग्रसर हों। इन तकनीकी उपायों से कैदियों में आत्म–सम्मान एवं भविष्य के प्रति आशा को बल मिलता है।

किशोर बंदियों के लिए विशेष कार्यक्रम

जैसे वयस्क कैदियों के लिए, वैसे ही किशोर सुधार गृहों में भी मानसिक पुनर्वास पर जोर देने वाले कार्यक्रम लागू किए गए हैं। योग एवं ध्यान सत्र किशोर बंदियों को तनाव कम करने और आत्म–नियंत्रण सीखने में मदद करते हैं। उदाहरणस्वरूप, पुणे के नेहरू उद्योग केंद्र (बाल अवलोकन गृह) में आर्ट ऑफ लिविंग द्वारा ध्यान और प्राणायाम का एक कोर्स चलाया गया, जिसके बाद एक 16 वर्षीय किशोर बंदी ने कहा कि ध्यान–प्राणायाम उसके जीवन का सबसे बेहतरीन अनुभव रहा और इससे उसे लंबे समय से होने वाले सिरदर्द से छुटकारा मिल गया। प्रारंभ में अनेक किशोर इन सत्रों में रुचि नहीं लेते थे, किंतु कुछ ही दिनों में उनमें सकारात्मक परिवर्तन देखा गया दृ वे नियमित रूप से आने लगे और उनका चिड़चिड़ापन व सिरदर्द जैसी शिकायतें घट गईं। यह बदलाव उनके दृष्टिकोण में सुधार का संकेत था।

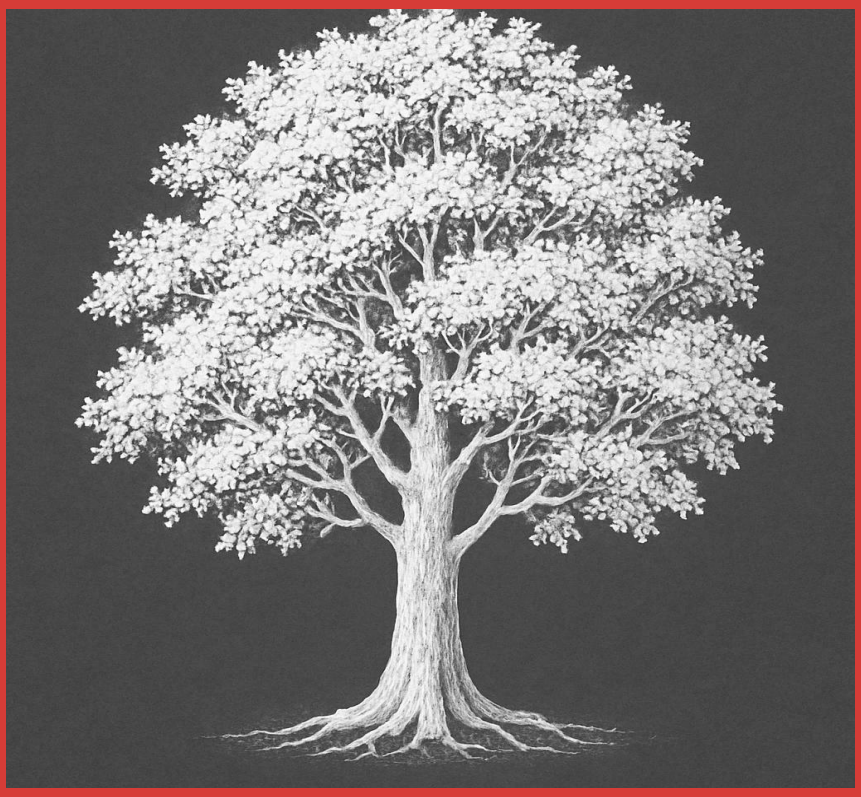
किशोर न्याय प्रणाली में मनोवैज्ञानिक परामर्श और थेरेपी भी एक अहम घटक है। सुधार गृहों में प्रशिक्षित परामर्शदाता युवाओं की भावनात्मक समस्याओं को सुनते और सुलझाते हैं। साथ ही, कई संस्थाएं रंगमंच, कला, संगीत एवं नृत्य थेरेपी के माध्यम से इन बच्चों को आत्म–अभिव्यक्ति का सुरक्षित मंच प्रदान कर रही हैं। ऐसे सृजनात्मक थेरेपी तकनीक साबित करती हैं कि वे किशोरों के भीतर के आघात और दबे हुए भावों को बाहर निकालने में सहायक हैं, जिससे उनका आत्मविश्वास बढ़ता है। दिल्ली के सुधार गृहों में थिएटर व एक्सप्रेसिव आर्ट्स के कार्यक्रमों ने कई 'कानून से संघर्ष में आए बच्चों' की सोच में सकारात्मक बदलाव लाने में मदद की है, जिससे उनमें अपने भविष्य के प्रति एक नई आशा जगी है। इन प्रयासों के तहत जीवन–कौशल, नैतिक शिक्षा, औपचारिकध्अनौपचारिक शिक्षा तथा करियर मार्गदर्शन भी दिया जाता है, ताकि ये किशोर सही दिशा में आगे बढ़ सकें।

निष्कर्ष

भारतीय जेलों में अपनाए जा रहे इन मनोवैज्ञानिक नवाचारों के परिणाम उत्साहजनक रहे हैं। ध्यान, योग और थेरेपी ने कैदियों के मनोबल को ऊँचा करने, तनाव कम करने तथा आपराधिक प्रवृत्ति को घटाने में अहम भूमिका निभाई है। कई बंदियों ने बेहतर मानसिक स्वास्थ्य प्राप्त कर अपने व्यवहार में सकारात्मक परिवर्तन दिखाए हैं, जिसका प्रत्यक्ष प्रमाण जेलों के भीतर कम हिंसा, बेहतर अनुशासन और सुधार के बाद कम पुनरावृत्ति (तमबपकपअपेउ) के रूप में देखा गया है। विशेष रूप से, किशोर बंदियों को सही मार्ग पर लाने में इन उपायों ने उन्हें नया दृष्टिकोण, आत्म–नियंत्रण और जीवन

कौशल प्रदान किए हैं। डिजिटल युग में वीडियो कॉल जैसी सुविधाओं ने कैदियों को भावनात्मक संबल देकर अवसाद तथा अलगाव की भावना को कम किया है। कुल मिलाकर, इन मनोवैज्ञानिक नवाचारों ने कैदियों के मानसिक कल्याण में सुधार और पुनर्वास की सफलता दोनों को सुनिश्चित करने की दिशा में महत्वपूर्ण प्रगति की है, जिससे जेलें वास्तव में सुधार गृह की अपनी परिभाषा के करीब पहुंच रही हैं।

ISSN: 3107-3883 (Online)



GLOBAL E-JOURNAL OF SOCIAL SCIENTIFIC RESEARCH
www.globaljssr.com

VOL. I, ISSUE 9 SEPTEMBER 2025
Internatioanl, Open Access, Peer Reviewed, Cross Ref., Multidisciplinary,
Bi-Lingual (English & Hindi), Monthly E-Journal

PUBLISHED BY:

Global Center for Social Dynamic Research (GCSDR)
New Delhi, India | www.globalcsdr.com
Email: editor.globaljssr@globalcsdr.com

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